

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

**U.S. Department of Justice  
United States Marshals Service**

**PROCESS RECEIPT AND RETURN**

See "Instructions for Service of Process by U.S. Marshal"

**PLAINTIFF**

**United States of America**

**DEFENDANT**

**JEROME WALKER**

**SERVE  
AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

**JEROME WALKER**

ADDRESS (Street or RFD, Apartment No., City, State and ZIP code)

**830 Ungers Lane Boyertown, PA 19512**

**COURT CASE NUMBER**

**14-04987**

**TYPE OF PROCESS**

**HANDBILL**

SEND NOTICE OF SERVICE COPY OF REQUESTER AT NAME AND ADDRESS BELOW

Number of process to be served with this Form 285

**KML Law Group, P.C.  
701 Market  
Suite 5000  
Philadelphia, PA 19106**

Number of parties to be served in this case

Check for service on U.S.A.

**FILED**

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers and Estimated Times Available for Service)

Signature of Attorney other Originator requesting service behalf of:

PLAINTIFF  
 DEFENDANT

TELEPHONE NUMBER  
215-627-1322

DATE  
10/3/16

**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY—DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated.  
(Sign only for USM-285 if more than one USM-285 is submitted.)

Total Process

District of Origin  
No.

District to Serve  
No.

Signature of Authorized U.S. Deputy or Clerk

Date

10/3/16

I hereby certify and return that I  have personally served,  have legal evidence of service,  have exercised as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc., shown or the address indicated below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below).

Name and title of individual served (if not shown above)

A person of suitable age and discretion due residing in defendant's usual place of abode

Address (complete only different than shown above)

Date 10/11/16 Time 3:00 pm

am  
 pm

Signature of U.S. Marshal or Deputy

*[Signature]*

Service Fee

Total Mileage Charges including endorsements

Forwarding Fees

Total Charges

Advance Deposits

Amount paid to U.S. Marshal or (Amount of Refund)\*

*65.00*

*8.10*

*73.10*

*8.10 - \$0.00-*

REMARKS:

*Post office occupied residence*

*15 miles roundtrip*

PRINT 5 COPIES

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285  
Rev. 12/80